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Bib Data Sheet

CONFIRMATION NO. 3328

|   |   |                                  |   |   |                                |
|---|---|----------------------------------|---|---|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/546,828  | <b>FILING OR 371(c) DATE</b><br>08/25/2005<br><b>RULE</b>   | <b>CLASS</b><br>356              | <b>GROUP ART UNIT</b><br>2112   | <b>ATTORNEY DOCKET NO.</b><br>046124-5406 |                                |
| <b>APPLICANTS</b><br>Takashi Koike, Shizuoka, JAPAN;  |   |                                  |   |   |                                |
| <b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/JP04/01921 02/19/2004 <i>Yes, S.A.</i>  |   |                                  |   |   |                                |
| <b>** FOREIGN APPLICATIONS *****</b><br>JAPAN 2003-049861 02/26/2003 <i>Yes, S.A.</i>   |   |                                  |   |   |                                |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 05/31/2006</b>  |   |                                  |   |   |                                |
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met <i>Allowance</i><br>Verified and <i>hyalro S. A.</i> <i>S.A.</i><br>Acknowledged Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>JAPAN | <b>SHEETS DRAWING</b><br>9  | <b>TOTAL CLAIMS</b><br>10                 | <b>INDEPENDENT CLAIMS</b><br>2 |
| <b>ADDRESS</b><br>23973   |   |                                  |   |   |                                |
| <b>TITLE</b><br>Device for measuring immunochromatography test piece  |   |                                  |   |   |                                |
| <b>FILING FEE RECEIVED</b><br>900   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                  | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |                                |